## LOCAL TELEPHONE COMPANY

## **ANNUAL REPORT**

RECEIVED

OF THE



ILEC

NAME Mountain View Telephone Company

(Here show in full the exact corporate, firm or individual name of the respondent)

LOCATED AT 218 East Main, Mountain View, AR 72560

(Here give the location, including street and number of the respondent's main business office within the State)

COMPANY # 131

(Here give the APSC-assigned company number)

TO THE

## ARKANSAS PUBLIC SERVICE COMMISSION



# **COVERING ALL OPERATIONS**

FOR THE YEAR ENDING DECEMBER 31, 2019

## **LETTER OF TRANSMITTAL**

To:	Arkansas Public S Post Office Box 40 Little Rock, Arkans	00					
	,						
Submit	ted herewith is the a	ınnua	I report cov	ering the ope	ration of	Mountain View Telepho (Company	
of <u>218</u>	East Main, Mountair (Locatio	n Viev	v, AR 7256	0 for the year	ar ending De	ecember 31, 2019. This re	port is submitted in
	ance with Section 5	1 of A				executed the verification g	iven below.
						(Signature)	
						Vice President - Finar (Title)	nce
						****	
				VEF	RIFICATION		
STATE	OF	)					
COUN	TY OF	)	ss.				
I, the u	ndersigned,		A	aron Millsap, (N	Vice Preside	ent - Finance	_ of the
Мо	untain View Teleph (Company	one C				nat the following report has	5
carefull and affa knowle gross re	repared under my d ly examined the san airs of said utility in dge, information, an	irectione, an respend d beli	nd declare the ct to each a fiet; and I funts and figu	he same a co and every ma urther say tha res contained	mplete and of tter and thing t no deduction	nd records of said utility: the correct statement of the bug set forth, to the best of mons were made before stated oing statements embrace	usiness ny ting the
						Handia (Signature)	
day of	ibed and sworn to b  February  mmission Expires		me this 020 <b>Y-29</b> -	24th			
		FSI IF	MCDANIEL	~		9-	

#### GENERAL INSTRUCTIONS, DEFINITIONS, ETC.

1	Two (2) copies of this report, properly filled out and verified shall be filed with the Utility Division of the Arkansas Public Service Commission, Little Rock, Arkansas, on or before the 31st day of March following the close of the calendar year for which the report is made.
2	The word "respondent" in the following inquiries means the person, firm, association or company in whose behalf the report is made.
3	If any schedule does not apply to the respondent, such fact should be shown on the schedule by the words "not applicable."
4	Exceptin cases where they are especially authorized, cancellations, arbitrary check marks, and the like must not be used either as partial or entire answers to inquiries.
5	Reports should be made out by means which result in a permanentrecord. The copy in all cases shall be made out in permanent black ink or with permanent black typewriter ribbon. Entries of a contrary or opposite character (such as decreases reported in a column providing for both increases and decreases) should be shown in red ink or enclosed in parentheses.
6	This report will be scanned in. Please bind with clips only.
7	Answers to inquiries contained in the following forms must be complete. No answer will be accepted as satisfactory which attempts by reference to any paper, document, or return of previous years or other reports, other than the present report, to make the paper or document or portion thereof thus referred to a part of the answer without setting it out. Each report must be complete within itself.
8	In cases where the schedules provided in this report do not contain sufficient space or the information called for, or if it is otherwise necessary or desirable, additional statements or schedules may be inserted for the purpose of further explanation of accounts or schedules. They should be legibly made on paper of durable quality and should conform with this form in size of page and width of margin. This also applies to all special or unusual entries not provided f form. Where information called for herein is not given, state fully the reason for its omission.
9	Schedules supporting the revenue accounts and furnishing statistics should be so arranged as to effect a division in the operations as to those inside and outside the state.
10	Answers to all inquiries may be in even dollar figures, with cents omitted and with agreeing totals.
11	Each respondents hould make its report in duplicate, retaining one copy for its files for reference, in case correspondence with regard to such report becomes necessary. For this reason, several copies of the accompanying forms are sent to each utility company concerned.

Give the name, title, office address, telephone number and e-mail address of the person to whom any correspondence concerning this report should be addressed:					
Name Aaron Millsap	Title Vice President - Finance				
Address P O Box 1970, Mountain Home, AR 72	2654				
Telephone Number 870-425-3100					
E-Mail _aaron.millsap@yelcot.com_					
Give the name, address, telephone number and e-mail address of the resident agent:					
Name Sara C Zimmerman	Telephone Number 870-425-3100				
Address P O Box 1970, Mountain Home, AR 72	2654				
E-Mail sara.zimmerman@yelcot.com					

## **IDENTITY OF RESPONDENT**

1.	Give the exact name by which respondent was known in law at the close of the year. Use the initial word "The" only when it is part of the name:				
	Mountain View Telephone Company				
2.	Give the location (including street and number) of (a) the main Arkansas business office of respondent at the close of the year, and (b) if respondent is a foreign corporation, the main business office if not in this state:				
	(a) 218 East Main Street (b) Mountain View, AR 72650				
3.	Indicate by an $\mathbf{x}$ in the proper space (a) the type of service rendered, and (b) the type of organization under which respondent was operating at the end of the year.				
	(a) ( ) Electric, ( ) Gas, ( ) Water, ( X ) Telephone, ( ) Other				
	(b) ( ) Proprietorship, ( ) Partnership, ( ) Joint Stock Association, ( X ) Corporation, ( ) Other (describe below):				
4.	If respondent is not a corporation, give (a) date of organization, and (b) name of the proprietor or the names of all partners, and the extent of their respective interest at the close of the year.				
	(a) Not Applicable				
	(b)				
5.	If a corporation, indicate (a) in which state respondent is incorporated, (b) date of incorporation, and (c) designation of the general law under which respondent was incorporated, or, if under special charter, the date of passage of the act:				
	(a) Arkansas				
	(b) March 15, 2006				
	(c) Act 255 of the Acts of the General Assembly of the State of Arkansas				
5. State whether or not respondent during the year conducted any part of its business within the State of Arkansas under a name or names other than that shown in response to inquiry No. 1 above. and. if so. give full particulars:					
	The bill mailed to subscribers is shown as "Yelcot" referring to all the customers held by the				

1.	State whether respondent is a consolidated or merged company. If so, (a) give date and authority for each consolidation or merger, (b) name all constituent and merged companies, and (c) give like particulars as required of the respondent in inquiry No. 5 above:	,
	(a) No	
	(b)	
	(c)	
8.	State whether respondent is a reorganized company. If so, give (a) name of original corporation, (b) date of reorganization, (c) reference to the laws under which it was reorganized and (d) state the occasion of the reorganization, whether because of foreclosure of mortgage or otherwise, giving full particulars.	
	(a) No	
	(b)	
	(c)	
	(d)	
9.	Was respondent subject to a receivership or other trust at any time during the year? If so, state:	No
	(a) Name of receiver or trustee:	
	(b) Name of beneficiary or beneficiaries for whom trust was maintained:	
	(c) Purpose of the trust:	
	(d) Give (1) date of creation of receivership or other trust, and (2) date of acquisition of respondent:  (1) (2)	
10.	Did the respondent act in any of the capacities listed in Paragraph (a) below during the past year? If so,	
	(a) Indicate the applicable one by an X in the proper space:	
	<ul><li>( ) Guarantor,</li><li>( ) Surety,</li><li>( ) Principalobligor to a surety contract,</li><li>( ) Principalobligor to a guaranty contract.</li></ul>	

(b) Insert a statement showing the character, extent, and terms of the primary agreement or obligation, including (1) names of all parties involved, (2) extent of liability of respondent, whether contingent or actual, (3) extent of liabilities of the other parties, whether contingent or actual, and (4) security taken or offered by respondent.

#### **DIRECTORS**

Give the name and office addresses of all directors at the close of the year, and dates of beginning and expiration of terms. Chairman (\*) and Secretary (\*\*) marked by asterisks.

Name of Director	Office Address	Date of Term		
Name of Director	Office Address	Beginning	End	
Calvin Czeschin, SR*	Mountain Home, AR	5/1/19	5/1/20	
Sara Czeschin Zimmerman	Mountain Home, AR	5/1/19	5/1/20	
Betsie Czeschin	Mountain Home, AR	5/1/19	5/1/20	

#### PRINCIPAL OFFICERS AND KEY MANAGEMENT PERSONNEL

Give the title of the principal officers, managers and key personnel, the names and office addresses of persons holding such positions at the close of the year.

Title	Name of person holding office at close of year	Office Address		
Chairman of the Board	Calvin Czeschin, SR	Mountain Home, AR		
President	Sara Czeschin Zimmerman	Mountain Home, AR		
Secretary	Leslie McDaniel	Mountain Home, AR		
Vice President Finance	Aaron Millsap	Mountain Home, AR		
Vice President Legal	Betsie Czeschin	Mountain Home, AR		
Vice President Operations	Shawn Lane	Mountain Home, AR		

GROSS ASSESSABLE REVENUES		
Description	Amount	
ARKANSAS GROSS ASSESSABLE REVENUES (excluding Interstate Tolls)	\$5,405,222	

## LOCAL EXCHANGE SERVICE STATISTICS

ACCESS LINES	ARKANSAS
Residence	4,160
Business	1,172
TOTAL RESIDENTIAL & BUSINESS ACCESS LINES	5,332
PBX Access Lines	18
Coin or Credit Card Paystation Access Lines	6
Company Official Access Lines (Numbers)	82
TOTAL ACCESS LINES	5,438

## STATEMENT OF ACCURACY

I do hereby state that the amounts contained in this report are true and accurate, schedules have been cross-referenced by use of the attached check list, and that the accuracy of all totals has been verified by me or under my supervision. Should I or anyone under my supervision become aware of any error in or omission from this report, I will take steps to notify the Arkansas Public Service Commission of such error or omission and provide corrected schedules as soon as possible.

**President/General Manager** 

# **COMPANY CONTACTS**

Company Information				
Company Name	Company Name Mountain View Telephone Company			
dba				
Official Mailing Address	P O Box 1970, Mountain Home, AR 72654			
Mailing Address for APSC Annual Assessment Invoice	P O Box 1970, Mountain Home, AR 72654			

AREA	PERSON TO CONTACT	PHONE #	FAX#	E-MAIL
Annual Report	Aaron Millsap	870-425-3100	870-435-8250	aaron.millsap@yelcot.com_
APSC Annual Assessme	Aaron Millsap	870-425-3100	870-435-8250	aaron.millsap@yelcot.com
Tariffs	Kelly Orsborn	870-425-3100	870-435-8250	kelly.orsborn@yelcot.com
Property Taxes	Aaron Millsap	870-425-3100	870-435-8250	aaron.millsap@yelcot.com
Regulatory Affairs	Lang Zimmerman	870-425-3100	870-435-8250	lang.zimmerman@yelcot.com

Please list the number of utility employees located in Arkansas	24